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Complete if Known Substitute for Form 1449 A & B/PTO **Application Number** 10/618,963 0000 KOA INFORMATION DISCLOSURE Confirmation Number 1 3 2003 Preben LEXOW PRADERING STATEMENT BY APPLICANT Filing Date First Named Inventor Art Unit (use as many sheets as necessary) Examiner Name Whisenant, E.

Attorney Docket Number

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Examiner Initials*	Cite No.1	U.S. I		Bakilandan Bada	
		Number	Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document
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		Country Code ³	Number ⁴	Kind Code ⁵ (if known)	MM-DD-YYYY	Applicant of Cited Document	Translation ⁶
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